PTO/SB/17 (05-07)
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Order de rap	respond to a collection of information unless it displays a valid OMB control number.								
Effective on 12/08/2004, Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007				Complete if Known Application Number 09/456,793-Conf. #6923					
						ecember 8, 1999			
						Christopher L. Knauft			
						A. Nguyen			
Applicant claims small entity status. See 37 CFR 1.27				1.0		176			
			AROM		6703-0002				
TOTAL AMOUNT OF PAYMENT (\$) 620.00				Attorney Docket No. 66703-0002					
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
X Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEARCH FEES EXAMINATION FEES									
Application Ty	rpe Fee (\$)	Small Entity Fee (\$)	Fee (Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80		······································	
Reissue	300	150	500	250	600	300		····	
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES Small Entity									
Fee Description							Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)							50	25	
Each independent claim over 3 (including Reissues)						200 360	100 180		
Multiple dependent claims				Dald (¢)	RA	itinia Dananda		100	
Total Claims Extra Claims Fee (\$) Fee			Paid (\$)	Multiple Dependent Claims Fee (\$) Fee Paid (\$)					
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)									
- = X =									
HP ≈ highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): 1251 Extension for response within first month								120.00 500.00	
1401 Notice of appeal 500.00									
SUBMITTED BY				Donielration No		T			
Signature	/Michael B. Stewart/		Registration No. (Attorney/Agent)	36,018	Telephone	(248) 59	4-0633		
Name (Print/Type) Michael B. Stewart Date August 2, 200								2, 2007	

Fee Transmittal
I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).

Dated: August 2, 2007

Electronic Signature for Michael B. Stewart: /Michael B. Stewart/